Combined Declaration For Patent Application and Power of Attorney							ATTO 83813		OCKET
As below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
MEASURING ABSOLUTE STATIC PRESSURE AT ONE OR MORE POSITIONS ALONG A MICROFLUIDIC DEVICE									
The specification of which (che	ck only one item b	elow):							
X is attached hereto.									
was filed as United States Application Serial No. on and was amended on (if applicable).									
was filed as PCT interr	national application	on Number on	and was	amended on (if applic	able).				
I hereby state that I have review	ed and understand	the contents of t	he above	identified specification,	including the o	laims, a	s amended b	y any am	endment
referred to above. I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.									
I hereby claim foreign priority I	benefits under Titl	e 35, United Stat	es Code,	§119 (a)-*d) or 365 (b)	of any foreign	applica	tion(s) for pa	itent or in	ventor's
certificate, or (365 (a) of any PC and have also identified below	T international ap	plication(s) whic	h designa	ntes at least one country of	ther than the	United S	tates of Ame	rica, liste	d below
one country other than the Unite	ed States of Americ	ca filed by me on	the same	e subject matter having a	filing date be	onai app fore that	of the applic	esignating ation(s) c	g a least of which
priority is claimed: PRIOR FOREIGN/PCT APPL						<u> </u>			
COUNTRY (# PCT, Indicate PCT)		PPLICATION NUMBER		DATE OF FILING			PRIORITY CLAIMED I	JNDER 35 USC	1119
(#FOI, MULAUFFOI)			· .	(month/dayyear)			YES		NO
				111			YES		NO
							YES		NO
I hereby claim the benefit under	Title 35, United St	ates Code, 119 §	(e) of an	v United States provision	al application(s) listed	below:		
PRIOR PROVISIONAL APPL									
	APPLICATION NUMBER				FILING DATE (mo	nth/day/year)			

I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:									
PRIOR US APPLICATIONS 0 35USC§120:	OR PCT INTERN	ATIONAL APP	LICATIO	ONS DESIGNATING TI	HE U.S FOR	BENEF	TT UNDER		
U.S. APPLICATIONS					STATUS (Check one)				
U.S. APPLICATION NUMBER		· · · · · · · · · · · · · · · · · · ·	U.S. FILING DATE		PATENTE	D	PENDING	ABAN	IDONED
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PCT APPLICATIONS DESIGNATING THE U.S.									
PCT APPLICATION NO. PCT FILIN		NG DATE U.S. SERIAL NUMBERS ASSIGNED (if any)				-			
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Co	Combin d Declaration F r Patent Application and P w r f Att rney (Continued) ATTORNEY DOCK 83813RLO						
aş th	POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company <u>Customer No. 01333</u> to prosecute this application and transact all business in the Patent and Trademark Office connected						
therewith.							
S	S nd Correspondence to: Patent Legal Staff Direct Telephone Calls to: (name and telephone number)						
			_	Company			
			te Street	1 2	Raymond L. Owens		
				14650-2201	585-477-4653		
		Roches	ici, iv i	14030-2201	FAX: 585-477-4646		
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN NAME		
	RESIDENCE &	DeBar CITY		Michael STATE OR FOREIGN COUNTRY	J. COUNTRY OF CITIZENSHIP		
0	CITIZENSHIP	Rochester		New York 14612 USA	USA		
1	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company		343 State Street, Rocheste			
2	FULL NAME OF INVENTOR	FAMILY NAME Yang		FIRST GIVEN NAME Zhihao	SECOND GIVEN NAME		
0	RESIDENCE &	CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
٧	CITIZENSHIP	Webster		New York 14580 USA	Peoples Republic of China		
2	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company		343 State Street, Rocheste			
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN NAME		
0	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
3	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP CODE (COUNTRY)		
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN NAME		
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4	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP CODE (COUNTRY)		
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5	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP CODE (COUNTRY)		
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN NAME		
٥	RESIDENCE & CITIZENSHIP			STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
6	6 BUSINESS ADDRESS BUSINESS ADDRESS			CITY	STATE & ZIP CODE (COUNTRY)		
tru imp app	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
SIGNATURE OF INVENTOR 287 SIGNATURE OF				OF INVENTOR 202	SIGNATURE OF INVENTOR 203		
DATE DATE							
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7/31/03	8/1/03	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE